

APPENDIX F- SAMPLE LETTERS/DOCUMENTS



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant/Construction Mechanic Name

Address Line 1

Address Line 2

City, State & Zip Code

Dear Complainant/Construction Mechanic Name:

Re: Complainant Name vs. Employer Name, Claim #

Project(s): Project Description

The Wage & Hour Division is in the process of conducting an investigation concerning your prevailing wage complaint for the above identified project(s). To determine your job duties, you must complete the enclosed questionnaire(s) and return it within ten (10) days.

Failure to respond will result in a decision based on the information provided by the employer.

Sincerely,

Investigator Name, Investigator

Enclosure

WAGE & HOUR DIVISION
P.O. BOX 30476 • LANSING, MICHIGAN 48909-7976
www.michigan.gov/wagehour • (517) 335.0400 • FAX (517) 335.0077

**CONSTRUCTION MECHANIC
PREVAILING WAGE QUESTIONNAIRE**

CONSTRUCTION MECHANIC NAME: Construction Mechanic Name

CLAIM #: Claim #

PROJECT NAME: Project Description

1. What was your specific job title?
2. Please describe in detail the specific job duties you were required to perform and the skills necessary to perform those duties.

3. Did you supervise other employees? Yes ____ No ____
If so, please identify by name.

What % of time is spent supervising? ____

4. Who was your direct supervisor and his or her job title?
5. What was your hourly rate of pay?
6. Circle any fringe benefits the employer provided:

vacation pay	health & welfare contributions
medical insurance	pension or retirement contributions
life insurance	profit sharing distribution
holiday pay	annuity fund or tax deferred savings plan contributions
a bonus	supplemental employment fund contributions
scholarship contributions	education or training fund contribution

7. Any additional information you may wish to add:

Signature

Date

Investigator: _____
 Claim Number: _____
 Complainant (Individual or Third Party): _____
 Third Party or Representative (filing on behalf of): _____
 Contractor: _____

PW_Jurisdiction_Checklist_9-15-07.doc
Rev 9-15-2007



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

November 7, 2007

Michigan Department of

Dear Sir or Madam:

Re: «Clmt_First_Name_MI» «Clmt_Last_Name», #«Claim_Number», vs. «Er_Name_1» «Er_Name_2»

This is a follow up to our telephone conversation of and my correspondence to you dated regarding a complaint alleging nonpayment of prevailing wages on the following project:

Project:

Contractor/Subcontractor: «Er_Name_1» «Er_Name_2»

Period: «Period_Claimed»

The division must determine if the above referenced project is subject to the provisions of the Prevailing Wage on State Projects Act, P.A. 166 of 1965. In order to make this determination, the following information is needed:

1. Documentation of the source of funding, i.e., direct state funding, state sponsorship, state qualified bond, or other funding sources
2. Copy of the advertisement and/or invitation to bid
3. Contract specifications that identify the project(s) and the requirement for payment of prevailing wage rates
4. Date project awarded or construction began
5. Copy of the prevailing wage rate schedule as contained in contract specification including any addendums
6. If applicable, the name and address of the prime contractor and/or project manager

Please provide the above information **within 7 days** of the date of this letter. Failure to provide the aforementioned records **will** result in an onsite visit to obtain them.

Sincerely,

_____, Investigator
(____) ____-____

cc: «Clmt_First_Name_MI» «Clmt_Last_Name»
«Clmt_Street»
«Clmt_City_MI_Zip»

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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

November 7, 2007

Michigan Department of

Dear Sir or Madam:

Re: «Clmt_First_Name_MI» «Clmt_Last_Name», #«Claim_Number», vs. «Er_Name_1» «Er_Name_2»

The Wage & Hour Division has received a complaint alleging nonpayment of prevailing wages on the following project:

Project:

Contractor/Subcontractor: «Er_Name_1» «Er_Name_2»

Period: «Period_Claimed»

The division must determine if the above referenced project is subject to the provisions of the Prevailing Wage on State Projects Act, P.A. 166 of 1965. In order to make this determination, the following information is needed:

1. Documentation of the source of funding, i.e., direct state funding, state sponsorship, state qualified bond, or other funding sources
2. Copy of the advertisement and/or invitation to bid
3. Contract specifications that identify the project(s) and the requirement for payment of prevailing wage rates
4. Date project awarded or construction began
5. Copy of the prevailing wage rate schedule as contained in contract specification including any addendums
6. If applicable, the name and address of the prime contractor and/or project manager

Please provide the above information **within 10 days** of the date of this letter. Failure to provide these records may result in an on-site visit to obtain them.

Sincerely,

_____, Investigator
(____) ____-____

cc: «Clmt_First_Name_MI» «Clmt_Last_Name»
«Clmt_Street»
«Clmt_City_MI_Zip»

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STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

November 7, 2007

«Er_Contact_Name»
«Er_Name_1» «Er_Name_2»
«Er_Street_1»
«Er_City_MI_Zip_1»

Dear Sir or Madam:

Re: «Clmt_First_Name_MI» «Clmt_Last_Name», #«Claim_Number», vs. «Er_Name_1» «Er_Name_2»

Contracting Agent:

Project:

This claim alleging violation of the Prevailing Wages on State Projects Act, P.A. 166 of 1965, has been assigned to me for investigation. This letter is to advise you that I will be at your address as shown above on at to determine the merits of this complaint.

Please have the following records available for inspection:

- Time records and payroll records for the entire period of the project
- Detailed job description/classification for the construction mechanic(s)
- Written fringe benefit policies
- A record fringe benefits paid or accrued during the fringe benefit year
- Other documents to verify fringe benefits paid on behalf of the construction mechanic(s)

Authority to inspect these records is contained in Section 5 of the Act, "Every contractor and subcontractor . . . shall keep an accurate record showing the name and occupation of and the actual wages and benefits paid to each construction mechanic employed by him in connection with said contract. This record shall be available for reasonable inspection by the contracting agent or the commissioner."

If the requested records are not made available in compliance with Section 5, a referral will be made to the prosecuting attorney for criminal action under Section 7 and/or the attorney general for civil action. The attorney general will pursue cost and fees associated with a lawsuit if filing is necessary to obtain records.

Be aware that under Section 6, "The contracting agent, by written notice to the contractor and the sureties of the contractor known to the contracting agent, may terminate the contractor's right to proceed with that part of the contract, for which less than the prevailing rates of wages and fringe benefits have been or will be paid, and may proceed to complete the contract by separate agreement with another contractor or otherwise, and the original contractor and his sureties shall be liable to the contracting agent for any excess costs occasioned thereby".

A violation of the Act will result in the contractor's name being added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

If you have any questions, please contact me immediately at (____) ____-____.

Sincerely,

, Investigator

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STATE OF MICHIGAN

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LANSING

KEITH W. COOLEY
DIRECTOR

REQUIREMENTS OF THE PREVAILING WAGES ON STATE PROJECTS ACT, PUBLIC ACT 166 OF 1965

The Wage & Hour Division determines prevailing rates pursuant to the Prevailing Wages on State Projects Act, P.A. 166 of 1965. The purpose of establishing prevailing rates is to provide rates of pay for workers on construction projects for which the state or a school district is the contracting agent and which is financed or financially supported by the state. By law, prevailing wage rates are compiled from the rates contained in collectively bargained agreements which cover the locations of the state projects. The attached prevailing wage rates provide an hourly rate which INCLUDES wage and fringe benefit totals for designated construction mechanic classifications. The overtime rates also include wage and fringe benefit totals. Please pay special attention to the overtime and premium pay requirements. The prevailing wage rate may be satisfied by payment in cash or payment in cash and credit for fringe benefits paid in cash or on behalf of a worker or fringe benefits provided to a worker.

State of Michigan responsibilities under the law:

- The department establishes the prevailing wage rate for each classification of construction mechanic requested by a contracting agent prior to contracts being let out for bid on a state project.

Contracting agent responsibilities under the law:

- If a contract is not awarded or construction does not start within 90 days of the date of the issuance of rates, a re-determination of rates must be requested by the contracting agent.
- Rates for classifications needed but not provided on the Prevailing Wage Rate Schedule, including rates for registered apprentices, must be obtained prior to contracts being let out for bid on a state project.
- The contracting agent, by written notice to the contractor and the sureties of the contractor known to the contracting agent, may terminate the contractor's right to proceed with that part of the contract, for which less than the prevailing rates of wages and fringe benefits have been or will be paid, and may proceed to complete the contract by separate agreement with another contractor or otherwise, and the original contractor and his sureties shall be liable to the contracting agent for any excess costs occasioned thereby.

Contractor responsibilities under the law:

- Every contractor and subcontractor shall keep posted on the construction site, in a conspicuous place, a copy of all prevailing wage and fringe benefit rates prescribed in a contract.
- Every contractor and subcontractor shall keep an accurate record showing the name and occupation of and the actual wages and benefits paid to each construction mechanic employed by him in connection with said contract. This record shall be available for reasonable inspection by the contracting agent or the department.
- Each contractor or subcontractor is separately liable for the payment of the prevailing wage rate to its employees.
- The prime contractor is responsible for advising all subcontractors of the requirement to pay the prevailing wage rate prior to commencement of work.
- The prime contractor is secondarily liable for payment of prevailing wage rates that are not paid by a subcontractor.
- A construction mechanic shall only be paid the apprentice rate if registered with the United States Department of Labor, Bureau of Apprenticeship and Training and the rate is included in the contract.

Enforcement:

A person who has information of an alleged prevailing wage violation on a state project may file a complaint with the Wage & Hour Division. The division will investigate and attempt to resolve the complaint informally. During the course of an investigation, if the requested records and posting certification are not made available in compliance with Section 5, a referral will be made to the prosecuting attorney for criminal action under Section 7 and/or the attorney general for civil action. The attorney general will pursue cost and fees associated with a lawsuit if filing is necessary to obtain records.

A violation of the Act will result in the contractor's name being added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

WAGE & HOUR DIVISION
P.O. BOX 30476 • LANSING, MICHIGAN 48909-7976
www.michigan.gov/wagehour • (517) 335-0400 • FAX (517) 335-0077

CERTIFICATION OF POSTING

MICHIGAN DEPARTMENT OF LABOR & ECONOMIC GROWTH
WAGE & HOUR DIVISION
6546 MERCANTILE WAY, SUITE 5, P.O. BOX 30476
LANSING, MICHIGAN 48909-7976
(517) 335-0400
Fax (517) 335-0077

AUTHORITY: **Act 166, Public Act of 1965**, As Amended
COMPLETION: Mandatory
PENALTY: Misdemeanor

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap or political beliefs.

Business Name: «Er_Name_1» «Er_Name_2»

Legal Identity: «Er_Name_1» «Er_Name_2»,
Attention: «Er_Contact_Name»
Address: «Er_Street_1»
«Er_City_MI_Zip_1»

Claimant Name:
«Clmt_First_Name_MI» «Clmt_Last_Name»
Claim Number:
«Claim_Number»

Project: project name

Section 5 of the **Prevailing Wages on State Projects Act**, 1965 PA 166, MCL 408.551 et seq., requires every contractor and subcontractor to keep posted on the construction site, in a conspicuous place, a copy of all prevailing wage and fringe benefit rates prescribed in a contract and shall keep an accurate record showing the name and occupation of and the actual wages and benefits paid to each construction mechanic employed by him in connection with said contract. The record shall be available for reasonable inspection by the contracting agent or the commissioner.

Section 7 of the **Prevailing Wages on State Projects Act**, 1965 PA 166, MCL 408-551 et seq., states any person, firm or corporation or combination thereof, including the officers of any contracting agent, violating the provisions of this act is guilty of a misdemeanor.

It is therefore directed that the following records be submitted to this office no later than :

- 1. Please attach a copy of the posted prevailing wage rates.**
- 2. Date the prevailing wage rates were posted on the construction site:**

- 3. Location of posting on construction site, i.e., job trailer, bulletin board, etc.:**

Is this location accessible to all construction mechanics? ☐ Yes ☐ No

FAILURE TO CERTIFY COMPLIANCE BY PROVIDING THE REQUESTED INFORMATION MAY RESULT IN A DETERMINATION THAT THE POSTING REQUIREMENTS HAVE NOT BEEN MET. SUCH A DETERMINATION WILL RESULT IN YOUR NAME BEING ADDED TO THE VIOLATORS LIST PUBLISHED ON THE DIVISION'S WEBSITE AND MAY BE REFERRED TO THE PROSECUTING ATTORNEY AND/OR ATTORNEY GENERAL FOR ENFORCEMENT.

(Sub) Contractor Signature (with title)

Date



STATE OF MICHIGAN

JENNIFER M. GRANHOLM
GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name
Address Line 1
Address Line 2
City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

On Complaint Receipt Date, the department received your complaint alleging non-payment of prevailing wages during the period of Period Claimed as an employee of Employer Name. An investigation was commenced and it has been determined that your past employer's whereabouts is unknown. For this reason the department is unable to proceed with the enforcement of your claim.

Accordingly, your claim has been suspended. If you can provide a new address for your past employer, please contact me immediately. Your claim will be kept on file for two years and will be reopened if an address is received.

Sincerely,

Manager Name, Manager

cc: Contracting Agent Contact	Project Manager Contact	Prime Contractor Contact
Contracting Agent	Project Manager	Prime Contractor
Address Line 1	Address Line 1	Address Line 1
Address Line 2	Address Line 2	Address Line 2
City, State & Zip Code	City, State & Zip Code	City, State & Zip Code

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STATE OF MICHIGAN

JENNIFER M. GRANHOLM
GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Prosecuting Attorney's Name, Prosecuting Attorney
County Name County
Address Line 1
Address Line 2
City, State & Zip Code

Dear Prosecuting Attorney's Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division, in the course of investigating Employer Name, has requested the employer comply with Section 5, being MCL 408.555, of the Prevailing Wages on State Projects Act, Public Act 166 of 1965, as amended, by providing the necessary records described in that section.

This is a request that you take appropriate action as allowed under Section 7, being MCL 408.557, of Public Act 166 of 1965, as amended, to gain the employer's compliance with Section 5 of the Act.

Thank you for your continued cooperation and assistance. If you have any questions regarding this matter, please contact me at (517) 335-0400.

Sincerely,

Administrator Name, Administrator

cc: Contracting Agent Contact
Contracting Agent
Address Line 1
Address Line 2
City, State & Zip Code

Project Manager Contact
Project Manager
Address Line 1
Address Line 2
City, State & Zip Code

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STATE OF MICHIGAN

JENNIFER M. GRANHOLM
GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

ER Name
ER Address
ER City, State, Zip

Re: **Clmt Name** Claim # **Claim Number**

A complaint has been filed alleging a violation of the Prevailing Wages on State Projects Act, P.A. 166 of 1965. This letter should not be construed as a determination that the claim is valid.

Name of Complainant: Clmt Name
Project Description: Project Description
Period Claimed: Period Claimed
Occupation: Occupation
Nature of Complaint: Nature of Complaint

Section 5 of Act 166 requires in part that every contractor and subcontractor maintain records and provide them to the department for inspection. Please provide copies of the time records, payroll records including gross earnings & itemization of deductions, written agreements or written policies, fringe benefits paid or fringe benefit policies, canceled checks or other information necessary to resolve the claim.

The Act also requires that every contractor and subcontractor post a copy of the prevailing wage rates in a conspicuous place at the construction site. Please provide written certification of compliance with the posting requirements to include: a copy of the posted rates, posting date, location of posting on construction site & whether or not this location is accessible to all construction mechanics.

Provide these records and certification **within ten (10) days**. Your response is necessary to evaluate the merits of the claim. You may complete a self audit and send a check to this office made payable to Clmt Name.

If the requested records and posting certification are not made available in compliance with Section 5, a referral will be made to the prosecuting attorney for criminal action under Section 7 and/or the attorney general for civil action. The attorney general will pursue cost and fees associated with a lawsuit if filing is necessary to obtain records.

Be aware that under Section 6, "The contracting agent, by written notice to the contractor and the sureties of the contractor known to the contracting agent, may terminate the contractor's right to

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proceed with that part of the contract, for which less than the prevailing rates of wages and fringe benefits have been or will be paid, and may proceed to complete the contract by separate agreement with another contractor or otherwise, and the original contractor and his sureties shall be liable to the contracting agent for any excess costs occasioned thereby”.

A violation of the Act will result in the contractor's name being added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

Please contact me if you require additional information about the complaint or law. All parties involved with this case must notify me of any address or phone number changes and any direct payments made or received.

Sincerely,

Inv Name, Investigator
Inv Phone Number

cc: Claimant
Contracting Agent
Prime Contractor (if known)
Project Manager (if known)

NAME:

DATE: November 7, 2007

CLAIM NUMBER: «Claim_Number»

**WAGE & HOUR DIVISION
PREVAILING WAGE ACT 166 CLOSING SUMMARY**

CLAIMANT: «Clmt_First_Name_MI» «Clmt_Last_Name»	CONTRACTOR: «Er_Name_1» «Er_Name_2»
CLAIMANT'S ADDRESS: «Clmt_Street» «Clmt_City_MI_Zip»	CONTRACTOR'S ADDRESS: «Er_Street_1» «Er_City_MI_Zip_1»

CONTRACTING AGENT:	PROJECT MANAGER:
CONTRACTING AGENT'S ADDRESS:	PROJECT MANAGER'S ADDRESS:

PRIME CONTRACTOR:	CC:
PRIME CONTRACTOR'S ADDRESS:	

PROJECT:	PERIOD CLAIMED: «Period_Claimed»
Jurisdiction Established? <input type="checkbox"/> Yes <input type="checkbox"/> No	TOTAL PERIOD REVIEWED:
Contractor Notification Date:	SAMPLE AUDIT PERIOD:

DIRECT PAYMENT TO CLAIMANT-PICK UP ON WIN		
AMOUNT PAID: GROSS N/A NET N/A	DATE PAID: N/A	CHECK NO.: N/A

TOTAL AMOUNT PAID TO DATE: N/A

RECOMMENDATION:
RECOMMENDED LETTER:

SUMMARY:

«Clmt_First_Name_MI» «Clmt_Last_Name», #«Claim_Number», vs. «Er_Name_1»
«Er_Name_2»
 , Investigator

Page 2
11/7/07



STATE OF MICHIGAN

JENNIFER M. GRANHOLM
GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

BK_DATE

BK_CLAIMANT_1
BK_CLMNT_ADDR1
BK_CLMNT_CITY_ST_ZIP

Dear Sir or Madam:

Re: BK_CLAIMANT_2 vs. BK_EMPLOYER_1
Claim Number: BK_CLAIM_NBR

The Wage & Hour Division has made numerous attempts to review the employer's records for your complaint. The employer has failed to respond to our requests for records.

Accordingly, your case has been referred to the Department of Attorney General – Labor Division, Labor Unit to initiate legal action under Section 5 of the Prevailing Wages on State Projects Act, P.A. 166 of 1965, to gain the employer's compliance.

If you have an address or phone number change, please contact the Department of Attorney General – Labor Division, Labor Unit at (517) 373-2560 or the BK_DIVISION_2 at the number provided below.

Your case will be assigned a number by the Attorney General's Office once it has been received and reviewed by them. They will keep you advised as to the progress of the case.

Sincerely,

BK_DIVISION_3

cc: Office of the Attorney General

WAGE & HOUR DIVISION
P.O. BOX 30476 • LANSING, MI 48909-7976
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STATE OF MICHIGAN

JENNIFER M. GRANHOLM
GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Prosecuting Attorney's Name, Prosecuting Attorney
County Name County
Address Line 1
Address Line 2
City, State & Zip Code

Dear Prosecuting Attorney's Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division, in the course of investigating Employer Name, has requested the employer comply with Section 5, being MCL 408.555, of the Prevailing Wages on State Projects, Public Act 166 of 1965, as amended, by posting a copy of the prevailing wage rates in a conspicuous place on the construction site.

This is a request that you take appropriate action as allowed under Section 7, being MCL 408.557, of Public Act 166 of 1965, as amended, to gain the employer's compliance with Section 5 of the Act.

Thank you for your continued cooperation and assistance. If you have any questions regarding this matter, please contact me at (517) 335-0400.

Sincerely,

Administrator Name, Administrator

cc: Contracting Agent Contact
Contracting Agent
Address Line 1
Address Line 2
City, State & Zip Code

Project Manager Contact
Project Manager
Address Line 1
Address Line 2
City, State & Zip Code

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GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name

Address Line 1

Address Line 2

City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division has completed the investigation of your prevailing wage complaint pursuant to the authority provided in the Prevailing Wages on State Projects Act, P.A. 166 of 1965.

The investigation found that Employer Name was not in compliance with the requirements of the Act. Employer Name has failed to pay. The division will continue to use every means available in an attempt to secure payment.

We are notifying Contracting Agent, by a copy of this letter, of its authority under Section 6, "The contracting agent, by written notice to the contractor and the sureties of the contractor known to the contracting agent, may terminate the contractor's right to proceed with that part of the contract, for which less than the prevailing rates of wages and fringe benefits have been or will be paid, and may proceed to complete the contract by separate agreement with another contractor or otherwise, and the original contractor and his sureties shall be liable to the contracting agent for any excess costs occasioned thereby".

The contractor's name will be added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

If you have any further questions, you may contact me at Wage & Hour Division at the phone number below.

Sincerely,

Manager Name, Manager

cc: Employer Contact Name	Prime Contractor Contact	Contracting Agent Contact	Project Manager Contact
Employer Name	Prime Contractor	Contracting Agent	Project Manager
Address Line 1	Address Line 1	Address Line 1	Address Line 1
Address Line 2	Address Line 2	Address Line 2	Address Line 2
City, State & Zip Code	City, State & Zip Code	City, State & Zip Code	City, State & Zip Code

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STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name
Address Line 1
Address Line 2
City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division has completed the investigation of your prevailing wage complaint pursuant to the authority provided in the Prevailing Wages on State Projects Act, P.A. 166 of 1965.

The investigation found the contractor was not in compliance with the requirements of the Act. Efforts to informally resolve this matter have been successful and no further action is required. The division's file will be closed.

Since there was a violation of the Act, the contractor's name will be added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

If you have any further questions, you may contact the Wage & Hour Division at the phone number below.

Sincerely,

Manager Name, Manager

cc:	Employer Contact Name	Prime Contractor Contact	Contracting Agent Contact
	Employer Name	Prime Contractor	Contracting Agent
	Address Line 1	Address Line 1	Address Line 1
	Address Line 2	Address Line 2	Address Line 2
	City, State & Zip Code	City, State & Zip Code	City, State & Zip Code

Project Manager Contact
Project Manager
Address Line 1
Address Line 2
City, State & Zip Code

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STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name
Address Line 1
Address Line 2
City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division has completed the investigation of the above prevailing wage complaint pursuant to the authority provided in the Prevailing Wages on State Projects Act, P.A. 166 of 1965.

The investigation found the contractor was in compliance with the requirements of the Act. A sample audit is enclosed. No further action is required and the division's file will be closed.

If you have any further questions, you may contact the Wage & Hour Division at the phone number below.

Sincerely,

Investigator Name, Investigator

Enclosure

cc: Employer Contact Name	Prime Contractor Contact	Contracting Agent Contact
Employer Name	Prime Contractor	Contracting Agent
Address Line 1	Address Line 1	Address Line 1
Address Line 2	Address Line 2	Address Line 2
City, State & Zip Code	City, State & Zip Code	City, State & Zip Code

Project Manager Contact
Project Manager
Address Line 1
Address Line 2
City, State & Zip Code

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P.O. BOX 30476 • LANSING, MICHIGAN 48909-7976
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STATE OF MICHIGAN

JENNIFER M. GRANHOLM
GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name
Address Line 1
Address Line 2
City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division has made numerous attempts to review the employer's records for your complaint. The employer has failed to respond to our requests for records.

This matter was referred to the prosecuting attorney in (county name) on PA date. As of the date of this letter the prosecuting attorney has List. In the absence of records the division will not be able to pursue your complaint.

As a result, the contractor's name will be added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

If you have any further questions, you may contact the Wage & Hour Division at the phone number below.

Sincerely,

Yvonne Clark, Manager

cc: Contracting Agent Contact
Contracting Agent
Address Line 1
Address Line 2
City, State & Zip Code

Project Manager Contact
Project Manager
Address Line 1
Address Line 2
City, State & Zip Code

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GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name

Address Line 1

Address Line 2

City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #

Project: Project Description

The complainant has withdrawn the complaint filed under the Prevailing Wages on State Projects Act, P.A. 166 of 1965, with the Wage & Hour Division.

As a result of this withdrawal, the case has been closed and will no longer be pursued by our division. If you have any questions concerning this matter, please contact our office.

Sincerely,

Investigator Name, Investigator

cc: Employer Contact Name

Employer Name

Address Line 1

Address Line 2

City, State & Zip Code

Contracting Agent Contact

Contracting Agent

Address Line 1

Address Line 2

City, State & Zip Code

Project Manager Contact

Project Manager

Address Line 1

Address Line 2

City, State & Zip Code

Prime Contractor Contact

Prime Contractor

Address Line 1

Address Line 2

City, State & Zip Code

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JENNIFER M. GRANHOLM
GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

ER Name
ER Address
ER City, State, Zip

Re: Clmt Name Claim # Claim #

A complaint has been filed alleging a violation of the Prevailing Wages on State Projects Act, P.A. 166 of 1965. This letter should not be construed as a determination that the claim is valid.

Name of Complainant: Clmt Name
Project Description: Project Description
Period Claimed: Period Claimed
Occupation: Occupation
Nature of Complaint: Nature of Complaint

Section 5 of Act 166 requires in part that every contractor and subcontractor maintain records and provide them to the department for inspection. Please provide copies of the time records, payroll records including gross earnings & itemization of deductions, written agreements or written policies, fringe benefits paid or fringe benefit policies, canceled checks or other information necessary to resolve the claim.

The Act also requires that every contractor and subcontractor post a copy of the prevailing wage rates in a conspicuous place at the construction site. Please provide written certification of compliance with the posting requirements to include: a copy of the posted rates, posting date, location of posting on construction site & whether or not this location is accessible to all construction mechanics.

Provide these records and certification **within ten (10) days**. Your response is necessary to evaluate the merits of the claim. You may complete a self audit and send a check(s) to this office made payable to the construction mechanic(s) along with a list of address(es).

If the requested records and posting certification are not made available in compliance with Section 5, a referral will be made to the prosecuting attorney for criminal action under Section 7 and/or the attorney general for civil action. The attorney general will pursue cost and fees associated with a lawsuit if filing is necessary to obtain records.

Be aware that under Section 6, "The contracting agent, by written notice to the contractor and the sureties of the contractor known to the contracting agent, may terminate the contractor's right to

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proceed with that part of the contract, for which less than the prevailing rates of wages and fringe benefits have been or will be paid, and may proceed to complete the contract by separate agreement with another contractor or otherwise, and the original contractor and his sureties shall be liable to the contracting agent for any excess costs occasioned thereby”.

A violation of the Act will result in the contractor’s name being added to the violators list published on the division’s website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

Please contact me if you require additional information about the complaint or law. All parties involved with this case must notify me of any address or phone number changes and any direct payments made or received.

Sincerely,

Inv Name, Investigator
Inv Phone Number

cc: Claimant
Contracting Agent
Prime Contractor (if known)
Project Manager (if known)



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name
Address Line 1
Address Line 2
City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division has reviewed the employer's records for the above complaint and determined that you are not a construction mechanic as defined in Section 1 of the Prevailing Wages on State Projects Act, P.A. 166 of 1965, because List Reason(s).

We will be unable to assist you further with your claim. The division's file on this matter is closed. If you have any further questions, you may contact me at Investigator Phone Number.

Sincerely,

Investigator Name, Investigator

cc: Employer Contact Name	Contracting Agent Contact	Project Manager Contact
Employer Name	Contracting Agent	Project Manager
Address Line 1	Address Line 1	Address Line 1
Address Line 2	Address Line 2	Address Line 2
City, State & Zip Code	City, State & Zip Code	City, State & Zip Code

Prime Contractor Contact
Prime Contractor
Address Line 1
Address Line 2
City, State & Zip Code

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STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name
Address Line 1
Address Line 2
City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division has completed its investigation of the above prevailing wage complaint pursuant to the authority provided in the Prevailing Wages on State Projects Law, P.A. 166 of 1965.

The investigation has revealed that Contracting Agent failed to List. We will be unable to assist you further with your claim; this office can take no further action.

If you have any further questions, you may contact me at Investigator Phone Number.

Sincerely,

Investigator Name, Investigator

cc: Contracting Agent Contact
Contracting Agent
Address Line 1
Address Line 2
City, State & Zip Code

Project Manager Contact
Project Manager
Address Line 1
Address Line 2
City, State & Zip Code

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GOVERNOR

DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name

Address Line 1

Address Line 2

City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division is unable to assist you with your prevailing wage complaint. It has been determined that the complaint is not within division's jurisdiction of the provisions of the Prevailing Wage on State Projects Act, P.A. 166 of 1965, because it was not filed within three years of the alleged violation period. No further action is required, and the division's file will be closed.

If you have any further questions, you may contact the Wage & Hour Division at the number provided below.

Sincerely,

Investigator Name, Investigator

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STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Complainant Name
Address Line 1
Address Line 2
City, State & Zip Code

Dear Complainant Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division is unable to assist you with your prevailing wage complaint. It has been determined that this project is not within the jurisdiction of the provisions of the Prevailing Wage on State Projects Act, P.A. 166 of 1965, because List Reason(s). No further action is required, and the division's file will be closed.

If you have any further questions, you may contact the Wage & Hour Division at the number provided below.

Sincerely,

Investigator Name, Investigator

cc: Contracting Agent Contact
Contracting Agent
Address Line 1
Address Line 2
City, State & Zip Code

Project Manager Contact
Project Manager
Address Line 1
Address Line 2
City, State & Zip Code

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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

«Er_Contact_Name»
«Er_Name_1» «Er_Name_2»
«Er_Street_1»
«Er_City_MI_Zip_1»

Dear Sir or Madam:

Re: «Clmt_First_Name_MI» «Clmt_Last_Name» vs. «Er_Name_1» «Er_Name_2», Claim #«Claim_Number»

In the course of investigating the above referenced claim filed under the Prevailing Wages on State Projects Act, P.A. 166 of 1965. «Er_Name_1» «Er_Name_2» has failed to provide records as requested on Notification letter date and 2nd records request date.

This letter is notification that «Er_Name_1» «Er_Name_2» is in violation of Section 5 of the Act. To avoid further action on this violation please provide the following records as soon as possible, but no later than 10 days from the date of this letter:

- Time records and payroll records for the entire period of the project
- Detailed job description/classification for the construction mechanic(s)
- Written fringe benefit policies
- A record fringe benefits paid or accrued during the fringe benefit year
- Other documents to verify fringe benefits paid on behalf of the construction mechanic(s)

Further action will include a referral to the prosecuting attorney for criminal action under Section 7 and/or the attorney general for civil action may be made. The attorney general will pursue cost and fees associated with a lawsuit if filing is necessary to obtain records.

Be aware that under Section 6, "The contracting agent, by written notice to the contractor and the sureties of the contractor known to the contracting agent, may terminate the contractor's right to proceed with that part of the contract, for which less than the prevailing rates of wages and fringe benefits have been or will be paid, and may proceed to complete the contract by separate agreement with another contractor or otherwise, and the original contractor and his sureties shall be liable to the contracting agent for any excess costs occasioned thereby".

A violation of the Act will result in the contractor's name being added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

If you have any questions, please contact me at (____) ____-____.

Sincerely,

, Investigator

cc: «Clmt_First_Name_MI» «Clmt_Last_Name»	Contracting Agent (CA)	Project Manager	Prime Contractor
«Clmt_Street»	CA Street	PM street	PC Street
«Clmt_City_MI_Zip»	CA City St & Zip	PM City St & Zip	PC City St & Zip

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STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Employer Contact Name

Employer Name

Address Line 1

Address Line 2

City, State & Zip Code

Dear Employer Contact Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division has completed its investigation of the above prevailing wage complaint and found that Employer Name was not in compliance with the requirements of the Prevailing Wages on State Projects Act, P.A. 166 of 1965.

Enclosed is a copy of the sample audit that was based on time and payroll records. **This is only a sample of the violation and does not include the total amount due for the entire period worked on the project.** Please complete a self-audit for the **entire** period Construction Mechanic Name **worked** on the project. The self-audit shall be certified by either a certified public accountant of the employer's choosing, or certified by the personal signature of the employer, attesting to the self-audit's authenticity and completeness with the following language prior to the signature: "I hereby certify that this self-audit is complete and correct as to its finding."

Please submit the completed self-audit and payment **for the full amount due**, payable to Construction Mechanic Name to this office within 14 days of the date of this letter.

Failure to pay the full amount due will result in notification of non-compliance to the contracting agent and your name being added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

If you have any questions, you may contact me at Manager Phone Number.

Sincerely,

Manager Name, Manager

Enclosure

cc:	Complainant Name	Contracting Agent Contact	Project Manager Contact	Prime Contractor Contact
	Address Line 1	Contracting Agent	Project Manager	Prime Contractor
	Address Line 2	Address Line 1	Address Line 1	Address Line 1
	City, State & Zip Code	City, State & Zip Code	City, State & Zip Code	City, State & Zip Code

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GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LABOR & ECONOMIC GROWTH
LANSING

KEITH W. COOLEY
DIRECTOR

Date

Employer Contact Name
Employer Name
Address Line
City, State & Zip Code

Dear Employer Contact Name:

Re: Complainant Name vs. Employer Name, Claim #
Project: Project Description

The Wage & Hour Division has completed its investigation of the above prevailing wage complaint and found that Employer Name was not in compliance with the requirements of the Prevailing Wages on State Projects Act, P.A. 166 of 1965.

Enclosed is a copy of the sample audit based on time and payroll records for one construction mechanic. **This is only a sample of the violation and does not include the total amount due for the entire period worked on the project.** Please complete self-audits for all construction mechanics similarly classified for the **entire** project period **worked**. The self-audits shall be certified by either a certified public accountant of the employer's choosing, or certified by the personal signature of the employer, attesting to the self-audits authenticity and completeness with the following language prior to the signature: "I hereby certify that this self-audit is complete and correct as to its finding."

Please submit the completed self-audits and payment(s) **for the full amount due**, payable to each individual construction mechanic along with a list of their addresses to this office within 14 days of the date of this letter.

Failure to pay the full amount due will result in notification of non-compliance to the contracting agent and your name being added to the violators list published on the division's website, which is updated monthly. This list includes the names and addresses of contractors and subcontractors the division has found in violation of the Act. The list is intended to assist contracting agents in determining who should work on state-funded projects.

If you have any questions, you may contact me at Manager Phone Number.

Sincerely,

Manager Name, Manager

Enclosure

cc:	Complainant Name	Contracting Agent Contact	Project Manager Contact	Prime Contractor Contact
	Address Line 1	Contracting Agent	Project Manager	Prime Contractor
	Address Line 2	Address Line 1	Address Line 1	Address Line 1
	City, State & Zip Code	City, State & Zip Code	City, State & Zip Code	City, State & Zip Code

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